LYKES BROS. INC.

SUBSIDIARY AND AFFILIATED COMPANIES FEC MAIL CENTER

SUBSIDIARY AND AFFILIATED COMI 400 North Tampa Street P.O. Box 1690 Tampa, Florida 33601

2015 JUN -9 PM 12: 20

Carl Bauman Chief Financial Officer carl.bauman@lykes.com Direct Dial Tel: 813/470-5075 Fax: 813/470-5082

June 2, 2015

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Mr. Christopher Morse Senior Campaign Finance Analyst Reports Analysis Division Federal Election Commission Washington, D. C. 20463

Re

Lykes Bros. Inc. Political Action Committee

Identification Number C00330290

Dear Mr. Morse:

Lykes Bros. Inc. Political Action Committee is in receipt of your correspondence dated May 7, 2015 and May 21, 2015 (copies enclosed). In response to that correspondence please find an electronic version of FEC FORM 1 STATEMENT OF ORGANIZATION dated January 30, 2015 naming me as Treasurer of the Lykes Bros. Inc. Political Action Committee. All of the reports filed in 2015 have been electronically signed by me.

Please let me know if you need anything further with respect to this matter.

Sincerely,

Carl Bauman





2015 JUN -9 PM 2: RQ-2

May 7, 2015

MICHAEL CARRERE, TREASURER LYKES BROS INC POLITICAL ACTION COMMITTEE (LYKES PAC) 400 NORTH TAMPA STREET TAMPA, FL 33602

Response Due Date 06/11/2015

IDENTIFICATION NUMBER: C00330290

REFERENCE: APRIL MONTHLY REPORT (03/01/2015 - 03/31/2015)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. Failure to adequately respond by the response date noted above could result in an audit or enforcement action. Additional information is needed for the following 1 item(s):

- Your report(s) was not signed by the treasurer or designated agent listed on your Statement of Organization (FEC Form 1). Please amend your report(s) by providing the signature of an individual that is authorized to sign the report(s). If a new treasurer has been appointed, please file an amended Statement of Organization or a letter (if not an electronic filer) to reflect this change. (52 U.S.C. §30104(a)(1) (formerly 2 U.S.C. §434(a)(1)) and 11 CFR §104.14(a) and (d))

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. Requests for extensions of time in which to respond will not be considered.

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please

LYKES BROS INC POLITICAL ACTION COMMITTEE (LYKES PAC)

Page 2 of 2

contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1133.

Sincerely,

Christopher Morse

Senior Campaign Finance Analyst

Reports Analysis Division

298





2015 JUN -9 PM 2: 49

FEDERAL ELECTION COMMISSION WASHINGTON, D.C. 20463

RQ-2

May 21, 2015

MICHAEL CARRERE, TREASURER LYKES BROS INC POLITICAL ACTION COMMITTEE (LYKES PAC) 400 NORTH TAMPA STREET TAMPA, FL 33602

Response Due Date 06/25/2015

IDENTIFICATION NUMBER: C00330290

REFERENCE: MAY MONTHLY REPORT (04/01/2015 - 04/30/2015)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. Failure to adequately respond by the response date noted above could result in an audit or enforcement action. Additional information is needed for the following 1 item(s):

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LYKES BROS INC POLITICAL ACTION COMMITTEE (LYKES PAC)

Page 2 of 2

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Sincerely,

Christopher Morse

Senior Campaign Finance Analyst

Reports Analysis Division

298

THOM: HAN: TWINE

FEC FORM 1

STATEMENT OF ORGANIZATION

FEC MAIL CENTER

2015 JUN -9 PM 12: 20

					Office Use Only
NAME OF COMMITTEE (In full)	310 463	(Check if name s changed)	Example: If typi over the lines.		FE4M5
Lykes Bros. Inc. I	Politic	al Action C	Committee		ı
					
	400 Mar				
ADDRESS (number and street)	400 Non	h Tampa Street			
(Check if address is changed)	LLI.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	L. <u>L. L. J.</u> . f. l. J		
see is citaliged)	Tampa			I I ^F	L 33602
	C C	TY ▲	<u> </u>	ST	ATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS				
(Check if address	carl.ba	uman@lykes.co	m		
ls changed)	Ontional	Second E-Mail Ad	dress		<u>, -</u>
		d.chase@lykes			
COMMITTEE'S WEB PAGE AD	DRESS (U	RI)			
STANCE AND A SECOND	1	,			
(Check if address is changed)	1			11111	
	لبـــا				
2. DATE 01 30	[1] Mar A.	2015			
3. FEC IDENTIFICATION NU	JMBER)	×01 -	00330290		
4. IS THIS STATEMENT	NEW	(N) OR	AMEN	IDED (A)	
I and the short have a constant and short					
I certify that I have examined the	iis Stateme	ent and to the best	or my knowledge a	and deliet it is tru	e, correct and complete.
Type or Print Name of Treasure	Michael	, L. Carrere		T	
Signature of Treasurer Micha	ael, L. Carres	re		Date	01 30 2015
		omplete information			atement to the penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 1 (Revised 06/2012)

	aidate	Committee:				
(a)	Ŋ	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name Candi						
Candi Party	idate Affiliatio	on Office Sought: House Senate President	State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Candi						
Party	y Com	nmittee:				
(d)	П	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
	~1 m		•			
	Clical A	This committee is a or subordinate) committee of the	Republican, etc.) Party.			
Polit	~1 m	This committee is a or subordinate) committee of the ction Committee (PAC): This committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund.	Republican, etc.) Party.			
Polit	~1 m	This committee is a or subordinate) committee of the ction Committee (PAC): This committee is a separate segregated fund. (Identify connected organization on line 6.) its committee is a separate segregated fund. Corporation w/o Capital Stock	Republican, etc.) Party. onnected organization is a Labor Organization			
Polit	~1 m	This committee is a or subordinate) committee of the ction Committee (PAC): This committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund.	Republican, etc.) Party. connected organization is a Labor Organization Cooperative			
Polit (e)	**	This committee is a or subordinate) committee of the ction Committee (PAC): This committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a Corporation Corporation Wo Capital Stock Membership Organization Trade Association In addition, this committee is a Lobbyist/Registrant PAC. This committee supports/opposes more than one Federal candidate, and is NOT a separate	Republican, etc.) Party. connected organization is a Labor Organization Cooperative			

Page 2

Join	t Fun	draising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)	Ū	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.		
	Con	nmittees Participating in Joint Fundraiser		
	Con	nmittees Participating in Joint Fundraiser		

FEC ID number C

FEC Form 1 (Revised 02/2009)

5. TYPE OF COMMITTEE

143
1350

1	
FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
Lykes Bros. Inc. Political Action Committee	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
Lykes Bros. Inc.	
PO Box 1690 Mailing Address	
Tampa FL 33601	- -
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in pooks and records. 	possession of committee
Full Name	
Malling Address	
	<u></u>
Title or Position CITY STATE	ZiP CODE
Telephone number	<u> </u>
 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer). 	name and address of
Full Name Carl Bauman of Treasurer	
Mailing Address PO Box 1690	
Tampa FL 33601 CITY STATE	ZIP CODE
Title or Position Treasurer Telephone number Telephone number	470 - 5075

FEC Form 1 (Revised	02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
į			ليبيب
	CITY	STATE	ZIP CODE
Title or Position	1 Telephone nu	umber	<u></u>
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc.		ittee deposits funds, hold	is accounts, rents
Lh	America		
Mailing Address	Bank of America		
	<u> </u>	<u> </u>	1111111
	Dallas	TX 75283-2	2400
	CITY	STATE	ZIP CODE
Name of Bank, Depository, etc	С.		
		<u> </u>	لىسىسا
Mailing Address	<u> </u>		
,			
			لبيا-ليي
	CITY	STATE	ZIP CODE

COLUMN OCYCLAND

POST OFFICE BOX 1690, (ZIP 33601)

LAMPA, FLORIDA 33602

400 NORTH TAMPA STREET



ZIP 33602 011D1162803

FIRST-CLASS MA

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06/03/2015

Hasler

RECEIVED FEC MAIL CENTER

2015 JUN -9 PM 12: 20

Senior Campaign Finance Analyst Federal Election Commission Reports Analysis Division C. 20463 Mr. Christopher Morse Washington, D.

Comment of the commen

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate ho	
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
PREPARER	6/9/15 DATE PREPARED
(3/2015)	DATE THE AND